

DEPARTMENT OF ADMINISTRATION (DIPATTAMENTON ATMENESTRASION) DIRECTOR'S OFFICE

(Ufisinan Direktot) Post Office Box 884 * Hagåtña, Guam 96932 TEL: (671) 475-1250 * FAX: (671) 477-6788



MAR 2 7 2019

Procurement No. DOA/HRD-RFP-GHI-20-001

Dear Prospective Offeror:

Buenas yan Hafa Adai!

We would like to thank you for your interest in submitting a proposal to provide health insurance services to the Government of Guam's Group Health Insurance Program.

On an annual basis, the Government of Guam issues a Request for Proposal (RFP) to interested health insurance companies licensed to do business on Guam under the laws of Guam, to provide group health insurance coverage to Government of Guam employees, retirees, survivors, their covered dependents and foster children under the legal custody of the Child Protective Services Division of the Department of Public Health and Social Services. Therefore, this is to invite your company to submit a proposal to this RFP. Negotiations are tentatively scheduled for the week of June 3, 2019.

To register as an interested company, you must complete and email the "Acknowledgement of Receipt of RFP" form to leonora.candaso@doa.guam.gov, naomi.sablan@doa.guam.gov, and suzanne.kohlmann@aon.com. In the event any amendments to the RFP are issued, the acknowledgement will ensure that all interested parties are informed of such change(s). The Government of Guam and the Department of Administration shall not be liable for failure to provide notice to any party who did not register contact information.

Thank you in advance for your response and we look forward to working with your company.

Edward Birn, Director

Department of Administration



Attention:

From:

Subject:

DEPARTMENT OF ADMINISTRATION (DIPATTAMENTON ATMENESTRASION) DIRECTOR'S OFFICE (Ufisinan Direktot)

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To register as an interested company, you must complete and email the following information to the following individuals: leonora.candaso@doa.guam.gov, naomi.sablan@doa.guam.gov, and suzanne.kohlmann@aon.com. The Negotiating Team



ACKNOWLEDGEMENT OF RECEIPT OF RFP

Procurement No.: <u>DOA/HRD-RFP-GHI-20-001</u>

Human Resources Division, Employee Benefits Branch

FY 2020 Health Insurance Program

Registration of interest to provide Health Insurance services

cannot guarantee t	that your company will receive any amendments or notices to the RFP that may be is s completed and submitted as provided herein. All carriers are advised to register as so
retrieved from the D	
Date:	
Company Name:	
Contact Person & Title:	
Contact Information:	Telephone No.: ()
	Facsimile No.: ()
	E-Mail address:
	E-Mail address:
Mailing address:	
Street address:	
	l



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Procurement No.:

DOA/HRD-RFP-GHI-20-001

Description:

FY 2020 Health Insurance Program Request for Proposal (RFP)

SPECIAL REMINDER TO PROSPECTIVE OFFERORS

Offerors shall carefully read all sections of this Request for Proposal (RFP) and be informed of all its terms and conditions. Offerors are especially alerted to the sections entitled "Proposal Contents and Requirements" in the RFP, and are asked to ensure that all required documents and information are included in their proposal.

Compliance with the following is mandatory, but not inclusive of all the requirements of the RFP:

- Carriers are advised to produce 1 original and 12 duplicate copies of their proposal. The original should be clearly marked as **original** and the 12 copies should be numbered as 1 of 12, 2 of 12, etc. The original and 12 numbered duplicate copies should be sent to the Director of the Department of Administration.
- To be qualified, pursuant to Title 4 GCA § 4302(c), an offeror shall submit a proposal made up of two parts; first an exclusive proposal, and second, a non-exclusive proposal, and meet the minimum requirements specified in the RFP (see Exhibit A for list).
- An exclusive proposal means a proposal based upon the assumption that the Government will contract with only one health insurance provider that is selected by the Negotiating Team from up to three different Health Insurance Carriers that all negotiate best and final offers with the Negotiating Team.
- A non-exclusive proposal means a proposal based upon the assumption that the Government may contract with up to three health insurance carriers that negotiate best and final offers with the Negotiating Team. If only two Health Insurance Carriers submit qualified proposals, the Non-exclusive proposal shall mean a proposal based upon the assumption that the Government will contract with more than one Health Insurance Carriers that negotiate best and final offers with the Negotiating Team.
- As set out hereafter, the exclusive proposal and the non-exclusive proposal shall be submitted together as a single submittal by each offeror.
- Each proposal must be organized, fully assembled and complete.
- All offerors should submit their cost proposal within the original response.
- Affidavit Forms
 - A. The Government requires five (5) different Affidavits and one (1) Declaration Form (Exhibit G Forms A, B, C, D, E & F.
 - B. Form A, Affidavit Disclosing Ownership and Commissions must be made between the dates of issuance of this RFP and the dates that proposals are due, so long as the ownership listing mentioned in the Affidavit is for the

- 365 day period preceding the date the offeror submits the proposal.
- C. One original of each form and twelve (12) copies of each form must be submitted. The original form shall be submitted with the original proposal and the copies shall be submitted with the proposal copies.
- The Questionnaire and Pricing information provided in Excel format with the RFP package, must be completed and returned in Excel format, as well as in PDF format, to ensure no changes were mistakenly made to the excel file during our analysis phase. Each proposal type, exclusive and non-exclusive, must have the excel format responses completed entirely.
- Redlined contract responses must be returned in Word format.
- Copies of the Negotiating Team's desired plan designs and alternatives are included with this RFP. Offerors must specify in their proposal any components to which they cannot comply and any changes they desire to the proposed plan design.
- Pursuant to Title 4 GCA § 4302(g), health insurance carriers contracted with the Government must provide specific claim level detail to the Government. Exhibit F is provided as a monthly claims summary by coverage. Claims data presented as Exhibit C in the RFP are enough for carriers to submit a proposal.

For Insured and Reinsurance Proposals:

- All reinsurers that assume accident and health risks ceded by the offeror must be licensed to transact reinsurance business in Guam. A copy of the current certificate of authority of the insurer and the reinsurer and a summary of each reinsurance treaty (is) must be submitted together with the proposal.
- The offeror must submit a copy of the reinsurance agreement or reinsurance treaty that transfers the risks for accident and health insurance. The submitted reinsurance agreement or reinsurance treaty must be duly authenticated by the reinsurer as the entire agreement between the offeror and the reinsurance company.

For Administration and Reinsurance Proposals:

All offerors must be licensed to transact reinsurance business in Guam. A copy of the current certificate of authority of the administrator and the reinsurer must be submitted together with the proposal.

For all Proposers:

- Adherence to the Administrative Procedures and the Marketing Guidelines is required.
- Offerors must read and review the Administrative Procedures (Exhibit H) and sign and submit the Administrative Procedures along with their proposal.
- Offerors must read and review the Marketing Guidelines (Exhibit I) and sign and submit the Marketing Guidelines along with their proposal.
- Premium, Enrollment and Claim information is included in the RFP as Exhibit C.
- This solicitation does not commit the Government of Guam to enter into negotiations, award a contract, to award an exclusive contract, to award non-exclusive contracts, to pay costs incurred, or contract for any services.
- The Government of Guam will conduct the health insurance program in compliance with all Federal and local statutes.
- Prospective offerors are required to register as an interested party by completing the "Acknowledgement of Receipt of RFP" and submitting the Acknowledgement of Receipt as soon as possible.
- Questions regarding this RFP must be submitted in writing in Word or in email, not PDF, and received by the Director of the Department of Administration as instructed in the RFP. Prospective offerors are encouraged to submit their questions as soon as they are formulated.

Proposal due dates:

All hard copies of proposals must be received by the Director of the Department of Administration no later than 4:00 p.m., May 3, 2019, Chamorro standard time. Hard copies of the entire proposal must be received by this due date and will be the determining factor for the purpose of timely submission. Hard copy of proposals received after this time and date will not be accepted. An electronic version of the proposal must also be uploaded to the secure file transfer site no later than 4:00 p.m., May 3, 2019 Chamorro, standard time. This SFTS tool was developed to provide a secure method for facilitating file transfers from outside parties. Prospective offerors will receive website access to the SFTS upon submission of the Acknowledgement of Receipt as instructed in the RFP.

RFP packages are available online at the Department of Administration's website at www.hr.doa.guam.gov.



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Edward Birn
Director
Edith C. Pangelinan
Deputy Director

DEPARTMENT OF ADMINISTRATION

Procurement No.: <u>DOA/HRD-RFP-GHI-20-001</u>
FY 2020 GROUP HEALTH INSURANCE PROGRAM
REQUEST FOR PROPOSAL
(RFP)

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I. GENERAL INFORMATION

A. Purpose and Background

Pursuant to Title 4, Chapter 4 of the Guam Code Annotated, Section 4301, the Governor of Guam is authorized to enter into contracts and reject proposals with one or more insurance companies for group insurance including but not limited to hospitalization, medical care, life and accident. In connection with such group benefits, the Government of Guam (Government) is accepting proposals from interested and qualified health insurance companies (including health maintenance organizations), and/or Third Party Administrators coupled with Reinsurance, licensed under applicable Guam laws, to provide health insurance coverage for eligible Government of Guam active employees, retired employees, survivors of retired employees and their covered dependents. This RFP is also issued to contract with health insurance carrier(s) to cover foster children under the legal custody of the Child Protective Services Division of the Department of Public Health and Social Services. All health insurance companies and/or Third Party Administrators coupled with Reinsurance must be licensed and comply with all regulatory requirements as promulgated by the Guam Insurance Commissioner, pursuant to the Insurance Statute of Guam and other applicable laws.

The intent, pursuant to Title 4 GCA §4302(c), is to present to the Governor of Guam the most economical and beneficial healthcare insurance proposal plan defined as the lowest cost option of either the exclusive or non-exclusive and not forward both an exclusive and a non-exclusive proposal to the Governor.

All qualified proposals, consisting of one exclusive proposal and one non-exclusive proposal, will be reviewed, evaluated and scored separately by the Negotiating Team. The Negotiating Team is established pursuant to Title 4 GCA §4302. The top three ranked exclusive proposals and the top three ranked non-exclusive proposals will be chosen, and those offerors will enter into negotiations with the Negotiating Team.

At the conclusion of negotiations, the Negotiating Team will use established criteria stated in the RFP and rank the three exclusive negotiated agreements. The lowest cost option between the exclusive and non-exclusive will be presented to the Governor. The executed contract or contracts will be offered to the employees and retirees of the Government of Guam.

We are looking for a one-year rate quote.

Currently, the Government has two (2) health insurance carriers: SelectCare and TakeCare. Each carrier offers two (2) plans to active employees, retirees, survivors and their dependents: PPO 1500 and HSA 2000 deductible plans. Each carrier also offers a Retiree Supplemental Plan to eligible retirees. All retired employees and survivors of a retired employee who are enrolled in Medicare (Parts A and B), and who participate by electing either Class I or Class II coverage, are required to enroll in the Retiree Supplemental Plan as mandated in Public Law 34-95. All carriers provide preferred provider organizations. Carriers must refer to the required plan designs and options for the description of FY2020 desired plan designs. Enrollment into these plans is voluntary.

There are approximately 251 foster children currently enrolled in the Foster Plan. Please refer to enrollment census data for those enrolled in the insurance plan.

The Group Health Insurance Rules and Regulations promulgated by the Department of Administration in April 1986, and the Rules of Procedure for the Negotiating Team promulgated in November 2013 are attached as Exhibit J.

B. General Authority for Procurement

The Negotiating Team is issuing this Request for Proposal (RFP) subject to the competitive selection procedures for professional services found in the Guam Procurement Law (Title 5 GCA § 5001, et seq.) and its regulations (Title 2 GAR Div. 4 § 1101, et seq.) Specifically, the procedure for this RFP is found at Title 2 GAR Div. 4, § 3114 and its subsections. Title 4 GCA §§ 4301 and 4302 require the acquisition of group health insurance for government employees, retirees and survivors by virtue of a Request for Proposal.

The Guam Code Annotated (GCA) and the Guam Administrative Rules and Regulations (GARR) are available from the web site of Guam's Compiler of Laws found at http://www.guamcourts.org/CompilerofLaws/index.html.

Nothing in this RFP or any process carried out pursuant to this RFP is meant to confer a right to any offeror to be awarded a contract or a right to enter into a contract with the Government.

C. All Parties to Act in Good Faith

The Guam Procurement Law and the Guam Procurement Regulations require that all parties involved in the preparation of proposals; the preparation of the RFP; the evaluation and negotiation of proposals; and the performance or administration of contracts to act in good faith.

D. Liability for Costs to Prepare Proposal

The Government is not liable for any costs incurred by any offeror in connection with the preparation of its proposal. By submitting a proposal, the offeror expressly waives any right it may have against the Government for any expenses incurred in connection with the preparation of its proposal.

E. Applicability of Guam Procurement Law and Guam Group Benefits Law

If any part of this RFP is contrary to the Guam Procurement Law (Title 5 GCA §§ 5001-5908), Guam Procurement Regulations (Title 2 GAR Div. 4 § 1101. - 12601), or Guam Group Benefits Law (Title 4 GCA §§ 4301 – 4308) or contains ambiguous terms, then such portion of the RFP shall be interpreted or resolved in favor of or according to the provisions of these laws and regulations.

F. Licensing and Other Statutory Requirements

All offerors must comply with Guam laws and procurement regulations and should provide a copy of a current Certificate of Authority issued by the Insurance Commissioner of Guam at the time of proposal submission. In the event any risks for accident and health is reinsured or transferred by the offeror to a reinsurance company, the reinsurer that assumes the risk must also have a current Certificate of Authority to transact reinsurance business on Guam. Any offeror that fails to submit the required copy of Certificate(s) of Authority and insurance license will not be permitted to enter into negotiations with the Negotiating Team. The requirements of having a Certificate of Authority by an insurance company and insurance licenses shall be continuous and shall be maintained during the period the carrier maintains an insurance service contract with the Government.

Pursuant to 22 GCA §18308.1 (form approval) and §18501.1 (rate approval), insurance health carries are to file the proposed forms and rates for the GovGuam health insurance through System for Electronic Rate and Form Filing ("SERFF"). Every health insurance policy form/contract filed with the Commissioner for approval must be accompanied by a filing fee of (\$20.00) and every health insurance rate request filed with the Commissioner for approval must be accompanied by a filing fee of (\$200.00). Carriers are required to timely submit the proposed policy and proposed rate in order to meet the statutory time-line, noting the proposed rate is subject to the Governor's approval.

G. Registration as Interested Party or Offeror and Fee for RFP

The RFP is available on-line at the Department's web site without charge at www.hr.doa.guam.gov.

All parties who receive an RFP and who are possibly interested in submitting a proposal must register as an interested party by filling out the "Acknowledgment of Receipt of RFP" form and delivering it as instructed within the time permitted. Only registered companies are assured of receiving any amendments to the RFP and responses to inquiries.

H. Restrictions Against Sex Offenders

If a contract is awarded, then the offeror must warrant that no person in its employment who has been convicted of a sex offense under the provisions of Title 9 GCA Chapter 25 or of an offense defined in Title 9 GCA Chapter 28 Article 2, or who has been convicted in any other jurisdiction of an offense with the same elements as heretofore defined, or who is listed on the Sex Offense Registry, shall provide services on behalf of the offeror while on Government property, with the exception of public highways.

If any employee of an offeror is providing services on Government property and is convicted subsequent to an award of a contract, then the offeror warrants that it will notify the Government of the conviction within twenty-four hours of the conviction, and will immediately remove such convicted person from providing services on Government property.

If the offeror is found to be in violation of any of the provisions of this section, then the Government will give notice to the offeror to take corrective action. The offeror shall take corrective action within twenty-four hours of such notice, and the offeror shall notify the Government when action has been taken. If the offeror fails to take corrective steps within twenty-four hours of notice, then the Government in its sole discretion may suspend temporarily the contract until corrective action has been taken.

I. Duration of Contract

The duration of any contract resulting from this RFP shall be for one year from October 1, 2019 through September 30, 2020.

J. Confidentiality and Proprietary Information

Pursuant to the procurement law, after an award of a services contract, the contract and proposal become public record. Proposals that are not awarded a contract remain private and the Government may not disclose them to the public. The full procurement record also becomes public record, including the proposals of awarded offerors except for those portions designated as confidential. **Offerors must identify in their cover letter** what items they deem proprietary and request that those items be maintained in confidence in addition to marking those specific items in their proposal. See Title 2 GAR, Div. 4 §3114(h)(2).

Prospective offerors are advised that rate information contained in the best and final offer will be communicated to the Governor and the Legislature.

K. Time is of the Essence

The Government intends for the services requested by the RFP to go into effect on October 1, 2019. An offeror awarded a contract must file the health insurance policy with the Insurance Commissioner of Guam and pay the applicable fees at least forty-five (45) days prior to the policy's effective date of October 1, 2019 (Friday, August 16, 2019). No health insurance policy or endorsement shall become effective unless filed with the Insurance Commissioner for approval at least forty-five (45) days prior to its effective date. According to Title 22 GCA § 18311, failure to follow this time frame is a crime. Section 18311 provides:

Any person violating any of the provisions of this article shall be guilty of a misdemeanor, and shall, upon conviction be subject to a fine of not more than one thousand dollars (\$1,000.00) if the person convicted is not a natural person, or if the person convicted is a natural person, a fine of not more than five hundred dollars (\$500.00) or imprisonment of not more than six (6) months, or both such fine and imprisonment.

Furthermore, the insurance laws prohibit advertisement of any rates unless the rates are filed with the Insurance Commissioner at least forty-five (45) days prior to the effective date of the rates or the advertisement of the rates, whichever comes first. Persons violating this provision are subject to a civil fine of up to \$5,000.00 pursuant to Title 22 GCA § 18504.

Therefore, time is of the essence, and all registered interested parties and potential offerors are asked to keep the applicable laws in mind, and to act accordingly.

L. Authority of Negotiating Team's Consultant

The Negotiating Team has contracted with a consultant, Aon, to assist the Negotiating Team with this procurement. All proposals will be reviewed by the Negotiating Team and its consultant. The consultant is authorized to communicate with any offeror or registered party and to request and obtain information.

M. Type of Contract

The contract to be awarded is a Fixed Price contract.

N. Other Information

a. This solicitation may be cancelled as provided for in the Guam procurement law and regulations.

b. Any proposal may be rejected in whole or in part when in the best interest of the Territory of Guam as provided for in Guam procurement law and regulations

O. Minimum Wage as Determined by U.S. Department of Labor

The offeror awarded a contract under this solicitation agrees to comply with Title 5, Sections 5801 and 5802. In the event that the offeror employs persons whose purpose, in whole or in part, is the direct delivery of service contracted by the Government, then the offeror awarded a contract under this solicitation shall pay such employees, at a minimum, in accordance with the U.S. Department of Labor Wage Determination for Guam and the Northern Marianas Islands in effect on the date of a contract. In the event that the contract is renewed by the Government, the offeror awarded a contract under this solicitation shall pay such employees in accordance with the Wage Determination for Guam and the Northern Marianas Islands promulgated on a date most recent to the renewal date.

The offeror awarded a contract under this solicitation agrees to provide employees whose purpose, in whole or in part, is the direct delivery of service contracted by the Government those mandated health and similar benefits having a minimal value as detailed in the U.S. Department of Labor Wage Determination for Guam and the Northern Marianas Islands, and guarantee such employees a minimum of ten (10) paid holidays per annum per employee.

The current U.S. Department of Labor Wage Determination for Guam and the Northern Marianas Islands is attached hereto as Exhibit G, Form F.

P. Patient Protection and Affordable Care Act Benefits To Continue

It is the intent of this RFP, and the contract to result from it, to enter into an agreement that provides for all of the benefits, rights and responsibilities afforded as a result of the Patient Protection and Affordable Care Act (Public Law 111-148), and the regulations promulgated under the authority of the Act.

Q. Experience Participation Ratio

Consistent with Guam law, for purposes of any contract entered into as a result of this RFP:

- Target Experience means the amount calculated by multiplying (1) the total premiums earned by the Health Insurance Provider
 for the full twelve (12) month Plan Year ending the last day of the fiscal year under the Participating Policies issued to the
 government of Guam with respect to such Plan Year, by (2) a percentage not lower than eighty-six percent (86%);
- Actual Experience means an amount calculated by subtracting from the Target Experience all claims incurred during such Plan
 Year and paid in the time period ending six months after the end of the Plan Year by the Health Insurance Provider under all
 the Participating Policies (PPO 1500, HSA 2000, RSP, and Dental);
 - o Claims are defined as: Payments to Medical, Dental, and Pharmacy Providers; Gym Membership payments
 - Excluded from Claims: Network access fees, Shared Savings or other cost containment programs, Wellness Incentives
 other than gym memberships, Quality Improvement incentives.
 - Note: The intent of this RFP is that Wellness and Quality Improvement incentives, quantifiable and payable directly to the member, will be included as claims in the numerator of the loss ratio calculation. Other general Quality Improvement activities and other costs are intended to be administrative costs for the carrier and are not to be included in the numerator of this calculation.
 - Subtracted from Claims: Pharmacy Rebates accrued during the plan year.
 - Premiums are calculated as premiums due in the course of the plan year October 1, 2019 to September 30, 2020: monthly enrollment by Plan and Class, multiplied by applicable premium rates by Plan and Class. Supporting documentation of this calculation must be provided with the annual statement of reconciliation
- Experience Refund means a positive Actual Experience. See Title 4 GCA §4302.3(g). The difference between: [86% (or higher, if specified) of Premiums] less [Claims defined above] will be refunded to the Government.

R. Tax and Withholding Liability

The Offeror assumes responsibility for its personnel and subcontractors providing services hereunder and will make all deductions and payments for social security and withholding taxes and for contributions to employment compensation funds, employee benefits, or any other payments required by the governments of the United States and Guam, if required. Offeror is responsible for paying when due any and all income taxes, gross receipts taxes, or any other taxes or assessments incurred as a result of the services

performed by the Offeror and Offeror's employees or agents under this Agreement or the compensation paid to Offeror for services performed under this Agreement in accordance with 11 GCA § 71114 (PL 33-166).

S. Status of Funding

Funds are not presently available for this solicitation. The government contribution is reasonably expected to be made available through an appropriation in the Fiscal Year 2020 Budget Act for the government of Guam. Subscriber contribution is reasonably expected to be made after enrollment in Fiscal Year 2020.

II. PROPOSAL CONTENTS, REQUIREMENTS AND INSTRUCTIONS

A. Proposal Contents and Requirements

INSTRUCTIONS CONSISTENT WITH P.L. 31-197.

A qualified proposal shall consist of two independent proposals: an exclusive proposal and a non-exclusive proposal. To be qualified, pursuant to Title 4 GCA §4302(c), an offeror shall submit a proposal made up of two parts; first, an exclusive proposal, and second, a non-exclusive proposal, and meet the minimum requirements specified in the RFP (see Exhibit A for list).

An exclusive proposal means a proposal based upon the assumption that the Government will contract with only one health insurance provider that is selected by the Negotiating Team from up to three different Health Insurance Carriers that all negotiate best and final offers with the Negotiating Team.

A non-exclusive proposal means a proposal based upon the assumption that the Government will contract with up to three health insurance carriers, that negotiate best and final offers with the Negotiating Team. If only two Health Insurance Carriers submit qualified proposals the Non-exclusive proposal shall mean a proposal based upon the assumption that the Government will contract with two Health Insurance Carriers that negotiate best and final offers with the Negotiating Team.

In this RFP, if the context so requires, any reference to 'proposal' is a reference to both the exclusive proposal and the non-exclusive proposal.

All proposals must be in writing and contain the following information in the order listed below:

- 1. <u>Cover letter.</u> Include the name of the offeror, the location of the offeror's principal place of business and, if different, the place of performance of the proposed contract, and type of business. The offeror shall designate a contact person and include his or her address and contact numbers, including e-mail address, if different from the offeror's. The designated person must be able to answer any questions asked by the Negotiating Team and its consultant regarding the offeror's proposal and must be able to negotiate the fee and other contract terms. Obligations committed by such signatures must be fulfilled.
- 2. <u>Acknowledgment of receipt of amendments</u>. If the Negotiating Team issues any amendments to the RFP, the offeror must acknowledge receipt of each individual amendment in its cover letter.
- Acknowledgement of responses: If the Negotiating Team issues any responses to questions received about the RFP, the offeror must acknowledge receipt of each individual response in its cover memo.
- 4. <u>Description of company</u>. The offeror must provide a brief description of its company, its capabilities and other information which illustrates to the Negotiating Team the level of expertise with which the company can provide the services requested.
- 5. <u>Authorized signature</u>. All proposals must be signed with the firm name and by an authorized officer, representative, agent, or employee of the offeror. Proof of authority may be requested by the Negotiating Team.
- 6. <u>Administrative and Marketing Guidelines.</u> All offerors are required to review and sign the Administrative and Marketing Guidelines and submit such with their proposal.

- 7. Consistency with 2 GAR Div. 4, § 3114(f)(2). The Guam Procurement Regulations at Title 2 GAR Div. 4, § 3114(f)(2) describes the minimum factors the Negotiating Team must evaluate in proposals. Those minimum factors are:
 - (A) the plan for performing the required services to include timelines to conduct the services, and explaining how the services will be performed;
 - (B) ability to perform the services as reflected by technical training and education, general experience, specific experience in providing the required services, and the qualifications and abilities of personnel proposed to be assigned to perform the services;
 - (C) the personnel, equipment, and facilities to perform the services currently available or demonstrated to be made available at the time of contracting and during the term of any resulting contract; and
 - (D) number of year's offeror's business has been in existence and a record of past performance of similar work to include a listing of other contracts under which services similar in scope, size or discipline to this RFP have been undertaken with contact names, addresses, and telephone numbers.

All offerors must substantiate their ability to provide the insurance services requested in this RFP consistent with the minimum factors described in § 3114(f)(2).

- 8. <u>Financially Stable</u>. The offeror must demonstrate that it is financially capable to perform the scope of services under the RFP. **Please note that the government only requires 1 original and 1 copy of the audited financial and NAIC statements.** Please refer to Section II, item B.5, Form and Number of Proposal for distribution instructions. At a minimum, a proposal must contain satisfactory responses to the following:
 - a. Each offeror must provide the most recent audited financial statements (2017 or most recent, if 2018 not available) for the healthcare insurance business only for the underwriting insurance company.
 - b. Each offeror must provide the most recent Annual Statement and Risk-Based Capital Report that has been filed with the National Association of Insurance Commissioners.
 - c. The insurance company or third party administrator must also provide proof that it has errors and omissions insurance that will suitably protect the Government, or proof in the form of a written statement indicating that it is willing to obtain the errors and omissions insurance.
 - d. If some part or all of the funds of the plan are to be held by an administrator, the administrator must also provide its most recent audited financial statements and proof that it has errors and omissions insurance, or proof in the form of a written statement indicating that it is willing to obtain the errors and omissions insurance.
 - e. Each offeror must also indicate the amount of any payment obligations for eligible services rendered by the Guam Memorial Hospital, other hospitals, physicians, and other health service providers which are outstanding. The information for each hospital, physician, and other provider must be separate.
 - f. Each offeror must indicate the amount of any potential payment obligations which are unpaid pending utilization review.
 - g. If the offeror contracts with a third party for utilization review services, the offeror must indicate the cost of such service.
- 9. <u>Submission of Guam business license</u>. All offerors, to include reinsurers and underwriters, must submit a copy of a current Guam business license. If a current license or licenses have not been obtained yet, then they must be obtained and copies submitted prior to conclusion of negotiations, and the cover letter must explain that the offeror does not have a current Guam business license or licenses. If a copy of the required business licenses is not submitted by the time and date that all the terms and conditions of a contract are agreed to between the parties, then negotiations shall

terminate and the offeror will be disqualified on the basis of being non-responsible.

- Submission of cost proposal. All offerors must submit a cost proposal with their exclusive proposal and a cost proposal with their non-exclusive proposal. Please see Exhibit E. All offerors are required to submit fully insured medical and dental premiums and rates at a minimum. This information will be used along with current enrollment information to assist the Negotiating Team and its consultant in analyzing the cost portion of the proposal. The cost experience data must include the amounts spent in each of the categories specified in Section 500.3, paragraphs a through i of the group health insurance rules attached as Exhibit J. To assist with the offeror's preparation of its proposal, the Negotiating Team has provided certain information attached to this RFP and designated as Exhibits C through F. By submitting a proposal, the offeror certifies that the price submitted was independently arrived at without collusion. A Certification of the Cost or Pricing Data as provided in 2 GAR Div. 4 § 3118 will be required from the carrier(s) with whom a successful contract is negotiated.
- 11. <u>Proposed plan design.</u> Copies of the Negotiating Team's desired plan designs and alternatives are included with this RFP. Offerors must specify in their proposal any component to which they cannot comply and any changes they desire to the proposed plan design.
- 12. Responses to all questions in Exhibit B and Exhibit E. All offerors must answer questions found in Exhibit B and Exhibit E and attach the responses to both their exclusive and non-exclusive proposals. These answers need to be submitted on the enclosed excel format provided in the RFP package, as well as in PDF format, within the formal response.
- Submission of disclosure forms. The Guam Procurement Law requires each offeror to make a number of disclosures. Some of the disclosures are required for an offeror to qualify to submit a bid or a proposal. An explanation of each disclosure follows. For the ease of making these required disclosures, the Negotiating Team is providing sample disclosure forms. There are six (6) disclosure forms labeled Forms A through F, and they are found in Exhibit G. They must be completed and included with the offeror's proposal. Note that a qualified proposal requires submission of only one set of disclosure forms from an offeror. Failure to complete and submit the forms may disqualify the offeror's proposal as being non-responsive.
 - a. Affidavit Disclosing Ownership and Commissions (Form A). As a condition of bidding and doing business with the Government, an offeror must disclose in the form of an affidavit the names of all persons owning more than ten percent of the outstanding interest of the offeror's business during the twelve-month period immediately preceding the date the proposals are due, including the percentage owned by each such person or entity. The affidavit must be made between the date of issuance of this RFP and the date that proposals are due, so long as the ownership listing mentioned in the affidavit is for the 365-day period preceding the date the offeror submits the proposal.

The same affidavit must also disclose the identity of anyone who has received or is entitled to receive a commission, gratuity, percentage, brokerage or other compensation or contingent arrangement for procuring a contract with the Government or for assisting the offeror in obtaining business related to this RFP, and the value or amounts. Please note that commissions, gratuities, percentages, contingency fees, or other compensation for the purposes stated herein are prohibited by Guam law, except that this prohibition does not apply to fees payable by the offeror upon contracts or sales secured or made through bona fide established commercial or selling agencies maintained by the offeror for the purpose of securing business.

- b. Affidavit re Non-Collusion (Form B). The offeror must represent that the offer is genuine and not a sham and that the offeror is not in collusion with others, that the offeror has not colluded, conspired, connived or agreed, directly or indirectly, with any other person to put in a sham proposal, to fix the cost of the contract, to secure any advantage against the Government or any person interested in the contract.
- c. Affidavit re No Gratuities or Kickbacks (Form C). The offeror must represent that it has not violated, is not violating, and promises that it will not violate, the prohibition against gratuities and kickbacks set forth in the Guam Procurement Law. The prohibition is as follows: It is a bri8each of ethical standards for any person to offer, give, or agree to give any Government employee or former Government employee, or for any Government employee or former Government employee to solicit, demand, accept, or agree to accept from

another person, a gratuity or an offer of employment in connection with any decision, approval, disapproval, recommendation, preparation of any part of a program requirement or a purchase request, influencing the content of any specification or procurement standard, rendering of advice, investigation, auditing, or in any other advisory capacity in any proceeding or application, request for ruling, determination, claim or controversy, or other particular matter, pertaining to any program requirement or a contract or subcontract, or to any solicitation or proposal thereof. Further, it shall be a breach of ethical standards for any payment, gratuity, or offer of employment to be made by or on behalf of a subcontractor under a contract to the prime contractor or higher tier subcontractor or any person associated therewith, as an inducement of the award of a contract or order.

- d. Affidavit re Ethical Standards (Form D). The offeror must represent that it has not knowingly influenced, and promises that it will not knowingly influence, a Government employee to breach any of the ethical standards set out in Guam's procurement code or regulations pertaining to ethics in public contracting.
- e. Affidavit re Contingent Fees (Form E). The offeror must represent as a part of its proposal that such offeror has not retained any person or agency to solicit or secure a Government of Guam contract upon an agreement or understanding for a commission, percentage, brokerage, or other contingent fee or arrangement, except for retention of bona fide employees or bona fide established commercial selling agencies for the purpose of securing business.
- f. Declaration for Compliance with US DOL Wage Determination (Form F). Offerors are required to declare in non-affidavit form that they are in compliance with 5 GCA § 5801 and § 5802 regarding wage determination, and the current applicable US DOL Wage Determination must be attached to the declaration.
- 14. Submission of Contract and Certificate of Insurance Changes and Additions. A proposed contract and a proposed certificate of insurance are included in the RFP at Exhibit L. PLEASE NOTE: Each offeror is required to submit with its proposal any changes it desires to the proposed contract and to the proposed certificate of insurance. Without notice of requested changes from an offeror, the Negotiating Team will assume and rely upon the proposed contract and the proposed certificate of insurance as the basis of any agreement reached during negotiations.

B. Proposal instructions

1. Inquiries. All questions regarding this RFP must be submitted in writing in Word or in email, not PDF, and received by the Director of Administration on or before 4:00 p.m., Friday, April 5, 2019, Chamorro Standard time. Only potential offerors who have obtained an RFP and registered may submit written questions. The Negotiating Team will not respond to inquiries received after the inquiry deadline. Oral statements made by the Negotiating Team, its members or its consultant are not binding. The Negotiating Team will respond in writing and send the response via electronic mail. Potential offerors are encouraged to submit their questions as soon as it is formulated. Delivery of inquiries to the Negotiating Team must be emailed to all individuals as follows:

edward.birn@doa.guam.gov, suzanne.kohlmann@aon.com and cc: to both leonora.candaso@doa.guam.gov and naomi.sablan@doa.guam.gov.

If an inquiry requires an interpretation of the RFP, then the Negotiating Team shall prepare a response in the form of an amendment to the RFP. All registered interested parties shall be provided the amendment. For responses which merely guide the inquirer, the Negotiating Team has the discretion to provide the response to only the inquirer, or to all registered interested parties, depending on the content of the inquiry and response.

2. <u>Sufficiency of proposals</u>. Unnecessarily elaborate brochures or other presentations beyond those sufficient to present a complete and effective proposal are not desired. Elaborate artwork, expensive visual or other presentations are neither necessary nor desired. The Negotiating Team will look instead for the quality of the information provided. The onus will be on the offeror to convince the Negotiating Team of the offeror's capability to perform services through the documentation enumerated above in this paragraph. As each offeror will have its own unique operation, its financial

ability will be assessed individually based on its audited financial statements, convention form, A. M. Best report, and reinsurance treaties, as may be applicable. Factors that will be taken into consideration include, but are not limited to, the following:

a. Any qualified audit opinion

b. The ratio of current assets to current liabilities

c. Adequacy of reserves

d. Ability to generate underwriting gains

e. History of overall profits or losses

f. A. M. Best ratings

g. Reinsurance

h. Experience in health insurance or HMO underwriting

i. Experience in Third Party Administration

j. Risk-based capital report

- 3. <u>Multiple representations of an insuring company.</u> For the purposes of negotiating the costs and contractual terms, the insurance company shall designate a company representative who shall have full authority to make plan design and rating decision at the negotiation table on behalf of the company.
- 4. <u>Late proposals.</u> No proposal will be accepted after the deadline for submitting proposals. If a proposal is delivered to the Government of Guam after the deadline for submission, it will be time-stamped and dated by the Government. However, late proposals are considered non-responsive and will not be considered by the Negotiating Team.
- 5. <u>Form and number of proposals</u>. Each offeror shall prepare one (1) original and twelve (12) numbered hard copies of its proposal. The original and twelve (12) copies must be labeled as original and copies and sent to the Government.

In addition, each offeror should prepare only one (1) original and one (1) copy of its audited financial statements. The audited financial statements should be sent to the Director of the Department of Administration. Note: The original audited statement must be included in the original proposal.

Handwritten proposals are not acceptable. Each proposal must be organized, fully assembled and complete.

6. Where and how to submit proposals. Proposal packages must be sealed and mailed or delivered to the following names and addresses. The Government is not responsible for any delivery costs or postage due. Proposals will not be accepted via facsimile or electronic mail (email) as these two mediums do not allow for the proposal to be sealed or submitted in an original form with multiple copies as required by law. Proposals should be marked "confidential."

The original and twelve (12) copies of the proposal, along with the original and one (1) copy of the audited financial statement, shall be sent to:

If mailed, to:

Director, Department of Administration

P.O. Box 884

Hagatna, Guam 96932

If delivered, to:

Department of Administration, Director's Office

590 S. Marine Corps Drive

Suite 224

International Trade Center (ITC) Building

Tamuning, Guam 96913

Additionally, one (1) electronic copy of the proposal in its original formats (MS Excel, Word, PDF, etc.), along with one electronic copy of the audited financial statement, shall be uploaded by the due date to the consultant's Managed File Transfer (MFT) site.

7. <u>Due date and time for proposals</u>. All hard copies of proposals, including a printed copy of the excel file, must be received by the Director of the Department of Administration no later than 4:00 p.m., May 3, 2019, Chamorro Standard Time. Hard copies of the entire proposal (including hard copies of the Questionnaire and Pricing portions) must be received by this due date and will be the determining factor for the purpose of timely submission. Hard copy of proposals received after this time and date will not be accepted.

Please note that Guam is one day ahead of the continental United States. The offeror is responsible for submitting the proposals in a timely manner regardless of choice of delivery method. The offeror's transfer of its proposal to the U.S. Post Office or to a delivery company does not constitute receipt by the Government.

III. GENERAL PROCEDURES

A. Receipt and registration of proposals

Proposals and modifications to proposals will be time-stamped upon receipt and held in a secure place until the established due date. The Government will keep a Register of Proposals Received identifying the proposals, the names of the offerors, and the number of modifications received, if any, by each offeror. The Register is not open for public inspection until after award of a contract. Proposals of offerors not awarded contracts do not become public records.

B. Opening of proposals

After the deadline for submission of proposals and as soon as practical, the proposals will be unsealed by at least two authorized Government representatives who shall be procurement administrators for purposes of this RFP as assigned by the Director of Administration. They shall at all times conduct the administration of this procurement together in the presence of each other. Proposals will not be opened publicly, nor disclosed to unauthorized persons.

C. Proposal evaluation and negotiation procedure

1. Phase I is the initial screening of all proposals to determine whether the minimum requirements specified in the RFP were met, including submission of qualified proposals as required by–Title 4 GCA §§ 4302(c) and 4301.1(e), (f), and (g), submission of all disclosure forms, and whether the proposals were signed as required. The lack of any of the disclosure forms or other information required to be submitted may be cause for a finding of non-responsiveness. Proposals will then be resealed and held in safe-keeping by one of the administrators until time for evaluation. If any proposal is determined to be non-responsive by the Negotiating Team, such offeror shall be notified in writing about the determination.

The Negotiating Team shall request of an offeror any documents or information for any proposals received and deemed to be non-responsive or not qualified that will cause said proposals to be responsive and qualified. A proposal shall only be disqualified or rejected if any offeror fails to submit the requested information to the Negotiating Team within three (3) business days after request.

At any time during Phase I, an offeror may be requested by the Negotiating Team or its consultant to provide clarification, documentation, data, or any other additional information to supplement its proposal. Failure to provide such additional information upon request and by the specified deadline may result in a determination that the offeror is non-responsive or non-responsible, whichever is applicable.

 Phase II. Phase II consists of the evaluation of the information provided by the offerors pursuant to Section II of this RFP by the Negotiating Team and the ranking of the offerors based on the evaluation results. A relative weight is assigned to the factors which will be rated on a scale from zero (0) to one hundred (100), with zero (0) for no response and one hundred (100) being the highest possible score.

For purposes of evaluations, exclusive proposals will be evaluated and ranked together, for Phase II. The offerors will be ranked in accordance with the number of total points. The three highest ranked exclusive offerors will be invited to enter into

negotiations with the Negotiating Team. After the benefit of reviewing all offers, ranking all offers and determining through the evaluation process the top three highest ranked offerors, the Team will determine the order of negotiations in Phase III. The Negotiating Team will negotiate with offerors in accordance with the decision made about the order of negotiations. Offerors shall be available for negotiations commencing in the month of June 2019. Otherwise, the evaluations, the assignment of points, and the ranking of offerors and their proposals is for the Negotiating Team's informational purposes only.

During the evaluations, the Negotiating Team and the Consultant may conduct discussions with any offeror, either in person or telephonically. Discussions are discretionary to the Negotiating Team and the Consultant. The purposes of such discussions shall be (a) to determine in greater detail the offeror's qualifications; or (b) to explore with the offeror the scope and nature of the required services, the offeror's proposed method of performance, and the relative utility of alternative methods of approach.

Discussions shall not disclose any information derived from proposals submitted by other offerors. If requested by the Negotiating Team or its Consultant the issues clarified during discussion should be put into writing by the offeror and submitted to the Negotiating Team within three business days of conclusion of discussions, and may be submitted electronically or via facsimile. The Negotiating Team will provide further instructions as may be necessary.

If the qualified offeror marked any portion or portions of its proposal as being confidential because the information is proprietary information, then those portions shall be reviewed by the Negotiating Team to determine whether they contain confidential or proprietary material. If the Negotiating Team agrees, then the parties shall move on to Phase III. If the Negotiating Team does not agree, then the Negotiating Team must issue a written determination regarding the matter explaining why. If the offeror is dissatisfied with the written determination, then it may withdraw its proposal or submit a protest according to the procedures set out in the Guam Procurement Law.

Upon resolution of confidentiality issues, if any, the Negotiating Team will provide further instructions as may be necessary.

3. Phase III. Phase III is the negotiation process. The Negotiating Team is not bound to seek parity in plan design or rates in negotiations for an exclusive contract. See Rule 200.2, Rule 200.3 and Rule 200.4 of the Group Health Insurance Rules and Regulation, April 1986, found at Exhibit J. The Negotiating Team will require parity in plan design and parity in premium rate tier ratios in negotiations for a non-exclusive contract. Offerors selected to negotiate a non-exclusive contract with the Negotiating Team will be advised of the parity decisions of the Negotiating Team prior to commencement of negotiations for a non-exclusive contract.

Offerors, ranked based upon exclusive bid scoring, will be asked to negotiate both an exclusive and a non-exclusive contract with the Negotiating Team and Consultant.

- 4. Phase IV. Phase IV is the evaluation, final ranking of exclusive and non-exclusive contracts, and choice of the most economical and beneficial offer for later presentation to the Governor. The Negotiating Team, using those factors set out in this RFP, will evaluate, rank and select the best and final offer. The Negotiating Team shall notify each registered offeror of the evaluation results to the extent permissible by law via facsimile or email.
- 5. Phase V. Phase V is the contract choice stage. The Governor of Guam decides whether to accept the recommendation of the Negotiating Team. By law, the contract must also be reviewed and approved by the Department of Revenue & Taxation, Bureau of Budget and Management Research, and the Attorney General before the Governor will provide his final approval by signing the contract. No contract is valid and binding until it is signed by the Governor. All finalists acknowledge that only the Governor may bind the Government to this contract and that the issuance of this Request for Proposal does not commit the Government of Guam to award a contract.

D. Cancellation of RFP or solicitation

The Negotiating Team may cancel this RFP or solicitation, in whole or in part, at any time, or may reject all proposals so long as the-Negotiating Team makes a written determination that doing so is in the best interest of the Government and a contract has not yet been fully signed. In the event of cancellation or rejection of all proposals, proposals that have been unsealed shall remain the property of the Government and not returned to the respective offerors. A proposal that has not been unsealed (such as late proposals) will be returned to the offeror upon request of the offeror.

E. Rejection of individual proposals

The-Negotiating Team shall have the prerogative to reject proposals in whole or in part when doing so is in the best interest of the Government as provided for in the procurement laws.

Edward Birn, Director

Department of Administration

Date: 3/27/19

Form A AFFIDAVIT DISCLOSING OWNERSHIP and COMMISSIONS

CITY	DF)	S.		
STATE	OF		a.		
A.		ndersigned, being first check only one]:	duly sworn, depose and say	that I am an authorized representative of the offeror an	ıd that
	[]	The offeror is an ind	ividual or sole proprietor and	owns the entire (100%) interest in the offering business	S .
	[]	The offeror is a corp	oration, partnership, joint ve	nture, or association known as [please state name of offeror company], and	the persons.
				held more than 10% of the shares or interest in the offe ubmission date of the proposal are as follows [if none, p	ring busines
		<u>Name</u>	<u>Address</u>	% of Interest	
B.	procuri			entitled to receive a commission, gratuity or other compe bid or proposal for which this affidavit is submitted are a <u>Compensation</u>	
C.	or a co		then I promise personally to nament. Signature of Offeror, if the	etween the time this affidavit is made and the time an avupdate the disclosure required by 5 GCA §5233 by delivone of the following: e offeror is an individual; e offeror is a partnership;	
		sworn to before me	Officer, if the	offeror is a corporation.	75
this	day of	, 20	1		
	RY PUBL	IC expires:	_		
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AU PI	ocuremen	t Form 002 (Rev. Nov	. 17, 2000)		

Form B AFFIDAVIT re NON-COLLUSION

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AG Procurement Form 003 (Jul. 12, 2010)

Form C AFFIDAVIT re NO GRATUITIES or KICKBACKS

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Form D AFFIDAVIT re ETHICAL STANDARDS

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The affiant is	actors or employees of c orth in 5 GCA Chapter tor, or employee of offe	offeror have knowingly infl 5, Article 11. Further, af For will knowingly influenc	uenced any Government of Gu fiant promises that neither he se any Government of Guam e	am employee to breach or she, nor any officer, employee to breach any
	Sig	gnature of one of the follow	wing:	
	~	Offeror, if the offero	or is an individual;	
		Partner, if the offere Officer, if the offere		
Subscribed and sworn to before n this day of				
NOTARY PUBLIC My commission expires				

AG Procurement Form 005 (Jul. 12, 2010)

Form E AFFIDAVIT re CONTINGENT FEES

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			j.			_[state nai	me of affiant s	signing	below], being	first d	uly sworn,	deposes	and sa	ys that:
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AG Procurement Form 007 (Jul. 15, 2010)

Form F DECLARATION re COMPLIANCE WITH U.S. DOL WAGE DETERMINATION

Procure	ement No.:	
Name (of Offeror Company:	<u> </u>
	l,	hereby certify under penalty of perjury:
(1) Tha the bid	t I am[or proposal in the foregoing identified pro	please select one: the offeror, a partner of the offeror, an officer of the offeror] making ocurement;
(2) Tha	t I have read and understand the provision	ons of 5 GCA § 5801 and § 5802 which read:
	§ 5801. Wage Determination Establi	shed.
	partnership or a corporation ("contractor the contractor employs a person(s) who Government of Guam, then the contract	ernment of Guam enters into contractual arrangements with a sole proprietorship, a or") for the provision of a service to the Government of Guam, and in such cases where ose purpose, in whole or in part, is the direct delivery of service contracted by the ctor shall pay such employee(s) in accordance with the Wage Determination for Guam ed and promulgated by the U.S. Department of Labor for such labor as is employed in eles to the Government of Guam.
	contractor by the Government of Guarr Article. Should any contract contain a stipulations contained in that contract for	st recently issued by the U.S. Department of Labor at the time a contract is awarded to a n shall be used to determine wages, which shall be paid to employees pursuant to this renewal clause, then at the time of renewal adjustments, there shall be made or applying the Wage Determination, as required by this Article, so that the Wage. Department of Labor on a date most recent to the renewal date shall apply.
	§ 5802. Benefits.	
	contain provisions mandating health ar minimum value as detailed in the Wage	mination detailed in this Article, any contract to which this Article applies shall also nd similar benefits for employees covered by this Article, such benefits having a e Determination issued and promulgated by the U.S. Department of Labor, and shall mum of ten (10) paid holidays per annum per employee.
(3) Tha	t the offeror is in full compliance with 5 G	GCA § 5801 and § 5802, as may be applicable to the procurement referenced herein;
	t I have attached the most recent wage of UCTIONS - Please attach!	determination applicable to Guam issued by the U.S. Department of Labor.
		Signature
		Date

AG Procurement Form 006 (Feb. 16, 2010)

Wage Determination List

See attached.

Daniel W. Simms

WD 15-5693 (Rev.-8) was first posted on www.wdol.gov on 01/01/2019

Division of

REGISTER OF WAGE DETERMINATIONS UNDER THE SERVICE CONTRACT ACT

By direction of the Secretary of Labor

U.S. DEPARTMENT OF LABOR EMPLOYMENT STANDARDS ADMINISTRATION WAGE AND HOUR DIVISION WASHINGTON D.C. 20210

Wage Determination No.: 2015-5693

Revision No.: 8

Date Of Revision: 12/26/2018

Wage Determinations Director

Note: Under Executive Order (EO) 13658, an hourly minimum wage of \$10.60 for calendar year 2019 applies to all contracts subject to the Service Contract Act for which the contract is awarded (and any solicitation was issued) on or after January 1, 2015. If this contract is covered by the EO, the contractor must pay all workers in any classification listed on this wage determination at least \$10.60 per hour (or the applicable wage rate listed on this wage determination, if it is higher) for all hours spent performing on the contract in calendar year 2019. The EO minimum wage rate will be adjusted annually. Additional information on contractor requirements and worker protections under the EO is available at www.dol.gov/whd/govcontracts.

States: Guam, Northern Marianas, Wake Island

Area: Guam Statewide

Northern Marianas Statewide

Wake Island Statewide

Fringe Benefits Required Follow the Occupational Listing	RATE
OCCUPATION CODE - TITLE FOOTNOTE	KATE
01000 - Administrative Support And Clerical Occupations	13.57
01011 - Accounting Clerk I	15.23
01012 - Accounting Clerk II	
01013 - Accounting Clerk III	17.04 17.71
01020 - Administrative Assistant	17.71
01035 - Court Reporter	10.89
01041 - Customer Service Representative I	
01042 - Customer Service Representative II	12.25
01043 - Customer Service Representative III	13.37
01051 - Data Entry Operator I	12.15
01052 - Data Entry Operator II	13.25
01060 - Dispatcher, Motor Vehicle	14.37
01070 - Document Preparation Clerk	13.71
01090 - Duplicating Machine Operator	13.73
01111 - General Clerk I	10.29
01112 - General Clerk II	11.2
01113 - General Clerk III	12.32
01120 - Housing Referral Assistant	19.20
01141 - Messenger Courier	11.16
01191 - Order Clerk I	12.57
01192 - Order Clerk II	13.73
01261 - Personnel Assistant (Employment) I	15.5
01262 - Personnel Assistant (Employment) II	17.2
01263 - Personnel Assistant (Employment) III	19.2
01270 - Production Control Clerk	20.0
01290 - Rental Clerk	11.1
01300 - Scheduler, Maintenance	15.3
01311 - Secretary I	15.3
01312 - Secretary II	17.2
01313 - Secretary III	19.2
01320 - Service Order Dispatcher	12.7
01410 - Supply Technician	17.7
01420 - Survey Worker	15.2
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01460	- Switchboard Operator/Receptionist	9.67
01531	- Travel Clerk I	12.77
	- Travel Clerk II	13.83
	- Travel Clerk III	14.78
	- Word Processor I	13.48
	- Word Processor II	15.13
	- Word Processor III Automotive Service Occupations	16.92
	- Automobile Body Repairer, Fiberglass	40.00
05010	- Automotive Electrician	13.58
	- Automotive Glass Installer	13.06 12.10
	- Automotive Worker	12.10
05110	- Mobile Equipment Servicer	10.27
	- Motor Equipment Metal Mechanic	13.71
	- Motor Equipment Metal Worker	12.10
	- Motor Vehicle Mechanic	13.71
	- Motor Vehicle Mechanic Helper	10.12
05280	- Motor Vehicle Upholstery Worker - Motor Vehicle Wrecker	12.10
	- Painter, Automotive	12.10
	- Radiator Repair Specialist	12.87 12.10
05370	- Tire Repairer	10.40
	- Transmission Repair Specialist	13.58
07000 -	Food Preparation And Service Occupations	
	- Baker	10.47
	- Cook I	10.88
	- Cook II	12.63
	- Dishwasher - Food Service Worker	9.04
	- Meat Cutter	9.31
	- Waiter/Waitress	11.86 9.12
	Furniture Maintenance And Repair Occupations	3.12
09010	- Electrostatic Spray Painter	16.21
	- Furniture Handler	9.87
	- Furniture Refinisher	16.21
	- Furniture Refinisher Helper	11.97
	- Furniture Repairer, Minor - Upholsterer	14.11
	General Services And Support Occupations	16.21
	- Cleaner, Vehicles	9.13
	- Elevator Operator	9.13
11090	- Gardener	12.58
	- Housekeeping Aide	9.23
	- Janitor	9.23
	- Laborer, Grounds Maintenance	9.50
	- Maid or Houseman - Pruner	9.13
	- Tractor Operator	8.51
	- Trail Maintenance Worker	11.51
	- Window Cleaner	9.50 10.31
12000 -	Health Occupations	10.71
	- Ambulance Driver	17.77
	- Breath Alcohol Technician	17.77
	- Certified Occupational Therapist Assistant	24.38
	- Certified Physical Therapist Assistant	24.38
	- Dental Assistant - Dental Hygienist	14.21
	- EKG Technician	32.84
	- Electroneurodiagnostic Technologist	23.96 23.96
	- Emergency Medical Technician	17.77
	- Licensed Practical Nurse I	15.88
12072	- Licensed Practical Nurse II	17.77
	- Licensed Practical Nurse III	19.81
	- Medical Assistant	11.54
12130	- Medical Laboratory Technician	17.11

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12160 - Medical Record Clerk	mtps://www.wdoi.gov/wdoi/scalles/std/10-0050.txt/19-4	12.37
12190 - Medical Record Technician		17.77
12195 - Medical Transcriptionist		15.88
12210 - Nuclear Medicine Technologist		39.04
12221 - Nursing Assistant I		11.03
12222 - Nursing Assistant II		12.43
12223 - Nursing Assistant III		13.54
12224 - Nursing Assistant IV 12235 - Optical Dispenser		15.22 17.77
12236 - Optical Technician		15.88
12250 - Pharmacy Technician		15.49
12280 - Phlebotomist		15.22
12305 - Radiologic Technologist		22.64
12311 - Registered Nurse I		20.70
12312 - Registered Nurse II		25.32
12313 - Registered Nurse II, Specialist	•	25.32
12314 - Registered Nurse III		30.64
12315 - Registered Nurse III, Anestheti	.ST	30.64
12316 - Registered Nurse IV 12317 - Scheduler (Drug and Alcohol Tes	rting\	36.72 22.01
12320 - Substance Abuse Treatment Couns	- -	22.01
13000 - Information And Arts Occupations		22.01
13011 - Exhibits Specialist I		19.26
13012 - Exhibits Specialist II		23.86
13013 - Exhibits Specialist III		29.18
13041 - Illustrator I		19.26
13042 - Illustrator II		23.86
13043 - Illustrator III		29.18
13047 - Librarian		26.42
13050 - Library Aide/Clerk 13054 - Library Information Technology	Systems	15.33 23.86
Administrator	3ys cens	25.00
13058 - Library Technician		16.64
13061 - Media Specialist I		17.21
13062 - Media Specialist II		19.26
13063 - Media Specialist III		21.47
13071 - Photographer I		17.06
13072 - Photographer II		19.06
13073 - Photographer III 13074 - Photographer IV		23.63 28.92
13075 - Photographer V		35.00
13090 - Technical Order Library Clerk		17.04
13110 - Video Teleconference Technicia	n	17.18
14000 - Information Technology Occupation		
14041 - Computer Operator I		15.71
14042 - Computer Operator II		16.26
14043 - Computer Operator III		18.13
14044 - Computer Operator IV		20.14
14045 - Computer Operator V	(*** 1)	22.31
14071 - Computer Programmer I 14072 - Computer Programmer II	(see 1) (see 1)	15.73 19.50
14073 - Computer Programmer III	(see 1)	23.84
14074 - Computer Programmer IV	(see 1)	45104
14101 - Computer Systems Analyst I	(see 1)	24.23
14102 - Computer Systems Analyst II	(see 1)	
14103 - Computer Systems Analyst III	(see 1)	
14150 - Peripheral Equipment Operator		15.71
14160 - Personal Computer Support Tech	nician	20.14
14170 - System Support Specialist 15000 - Instructional Occupations		21.24
15010 - Aircrew Training Devices Instr	uctor (Non-Rated)	24.23
15020 - Aircrew Training Devices Instr		29.32
15030 - Air Crew Training Devices Inst		33.30
15050 - Computer Based Training Specia		24.23
15060 - Educational Technologist		25.10

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15070	Flight Instructor (Pilot)	33.30
15080	· Graphic Artist	20.47
15085	Maintenance Test Pilot, Fixed, Jet/Prop	32.74
15086	Maintenance Test Pilot, Rotary Wing	32.74
	Non-Maintenance Test/Co-Pilot	32.74
	Technical Instructor	17.65
	· Technical Instructor/Course Developer · Test Proctor	21.58
	· Tutor	13.87
	aundry, Dry-Cleaning, Pressing And Related Occupations	13.87
16010	· Assembler	9.78
16030	· Counter Attendant	9.78
	Dry Cleaner	11.30
	· Finisher, Flatwork, Machine	9.78
	Presser, Hand	9.78
	Presser, Machine, Drycleaning	9.78
	Presser, Machine, Shirts	9.78
16100	Presser, Machine, Wearing Apparel, Laundry Sewing Machine Operator	9.78
	· Tailor	11.94
	· Washer, Machine	12.44 10.24
	Machine Tool Operation And Repair Occupations	10.24
19010	Machine-Tool Operator (Tool Room)	16.21
19040	Tool And Die Maker	20.37
21000 - N	Materials Handling And Packing Occupations	2015/
	Forklift Operator	13.96
	Material Coordinator	20.08
	Material Expediter	20.08
	Material Handling Laborer	11.37
	Order Filler	9.66
	· Production Line Worker (Food Processing) · Shipping Packer	13.96
	Shipping/Receiving Clerk	13.33
	Store Worker I	13.33 14.21
	Stock Clerk	19.94
21210	Tools And Parts Attendant	13.96
	Warehouse Specialist	13.96
	Mechanics And Maintenance And Repair Occupations	
	Aerospace Structural Welder	20.69
	Aircraft Logs and Records Technician	16.09
	· Aircraft Mechanic I · Aircraft Mechanic II	19.70
	· Aircraft Mechanic II · Aircraft Mechanic III	20.69
	· Aircraft Mechanic Helper	21.74
	Aircraft, Painter	13.70 18.50
	Aircraft Servicer	16.09
	· Aircraft Survival Flight Equipment Technician	18.50
23080 -	· Aircraft Worker	17.38
23091 -	· Aircrew Life Support Equipment (ALSE) Mechanic	17.38
I		
	· Aircrew Life Support Equipment (ALSE) Mechanic	19.70
II	Analina a Machauta	
	· Appliance Mechanic · Bicycle Repairer	16.21
	· Cable Splicer	12.96
	· Carpenter, Maintenance	19.59 14.47
	Carpet Layer	15.16
	· Electrician, Maintenance	17.86
23181	Electronics Technician Maintenance I	15.16
23182	· Electronics Technician Maintenance II	16.21
	· Electronics Technician Maintenance III	18.31
	Fabric Worker	14.11
	Fire Alarm System Mechanic	15.43
	Fire Extinguisher Repairer	13.06
23311	· Fuel Distribution System Mechanic	17.26

27004 - Alarm Monitor

27070 - Firefighter

27101 - Guard I

27102 - Guard II

27007 - Baggage Inspector

27040 - Detention Officer

27008 - Corrections Officer

27010 - Court Security Officer

27030 - Detection Dog Handler

10.90

9.13

12.05

12.05

10.90

12.05

12.05

10.90

9.13

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27131 - Police Officer I	https://www.wdol.gov/wdol/scafiles/std/15-5693.txt?v=8
27132 - Police Officer II	12.05 13.40
28000 - Recreation Occupations	15.40
28041 - Carnival Equipment Operator	12.37
28042 - Carnival Equipment Repairer	13.42
28043 - Carnival Worker	9.14
28210 - Gate Attendant/Gate Tender	13.18
28310 - Lifeguard 28350 - Park Attendant (Aide)	11.01
28510 - Recreation Aide/Health Facility	Attendant 14.74
28515 - Recreation Specialist	18.26
28630 - Sports Official	11.74
28690 - Swimming Pool Operator	17.71
29000 - Stevedoring/Longshoremen Occupati	
29010 - Blocker And Bracer 29020 - Hatch Tender	20.23
29030 - Line Handler	20.23
29041 - Stevedore I	20.23 18.85
29042 - Stevedore II	21.64
30000 - Technical Occupations	
30010 - Air Traffic Control Specialist,	Center (HFO) (see 2) 38.15
30011 - Air Traffic Control Specialist,	
30012 - Air Traffic Control Specialist,	
30021 - Archeological Technician I 30022 - Archeological Technician II	17.49
30023 - Archeological Technician III	19.56 24.21
30030 - Cartographic Technician	23.18
30040 - Civil Engineering Technician	21.93
30051 - Cryogenic Technician I	24.12
30052 - Cryogenic Technician II	26.63
30061 - Drafter/CAD Operator I	17.49
30062 - Drafter/CAD Operator II 30063 - Drafter/CAD Operator III	19.56
30064 - Drafter/CAD Operator IV	20.74 24.21
30081 - Engineering Technician I	14.62
30082 - Engineering Technician II	16.41
30083 - Engineering Technician III	18.36
30084 - Engineering Technician IV	22.34
30085 - Engineering Technician V	27.83
30086 - Engineering Technician VI 30090 - Environmental Technician	33.66
30095 - Evidence Control Specialist	21.78
30210 - Laboratory Technician	21.78 20.74
30221 - Latent Fingerprint Technician I	
30222 - Latent Fingerprint Technician I	I 26.63
30240 - Mathematical Technician	23.34
30361 - Paralegal/Legal Assistant I	19.44
30362 - Paralegal/Legal Assistant II 30363 - Paralegal/Legal Assistant III	23.68
30364 - Paralegal/Legal Assistant IV	28.99
30375 - Petroleum Supply Specialist	33.88 26.63
30390 - Photo-Optics Technician	21.93
30395 - Radiation Control Technician	26.63
30461 - Technical Writer I	22.17
30462 - Technical Writer II	27.10
30463 - Technical Writer III	32.79
30491 - Unexploded Ordnance (UXO) Techn 30492 - Unexploded Ordnance (UXO) Techn	
30493 - Unexploded Ordnance (UXO) Techn	
30494 - Unexploded (UXO) Safety Escort	24.24
30495 - Unexploded (UXO) Sweep Personne	
30501 - Weather Forecaster I	24.12
30502 - Weather Forecaster II	29.34
30620 - Weather Observer, Combined Uppe Surface Programs	r Air Or (see 2) 20.74
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30621 - Weather Observer, Senior (see 2)	23.00
31000 - Transportation/Mobile Equipment Operation Occupations	
31010 - Airplane Pilot	29.33
31020 - Bus Aide	8.15
31030 - Bus Driver	9.69
31043 - Driver Courier	8.97
31260 - Parking and Lot Attendant	8.93
31290 - Shuttle Bus Driver	9.99
31310 - Taxi Driver	9.43
31361 - Truckdriver, Light	9.78
31362 - Truckdriver, Medium	11.61
31363 - Truckdriver, Heavy	13.89
31364 - Truckdriver, Tractor-Trailer	13.89
99000 - Miscellaneous Occupations	
99020 - Cabin Safety Specialist	14.30
99030 - Cashier	9.12
99050 - Desk Clerk	9.70
99095 - Embalmer	24.24
99130 - Flight Follower	24.24
99251 - Laboratory Animal Caretaker I	21.62
99252 - Laboratory Animal Caretaker II	22.67
99260 - Marketing Analyst	20.09
99310 - Mortician	4 24.24
99410 - Pest Controller	14.61
99510 - Photofinishing Worker	12.74
99710 - Recycling Laborer	13.02
99711 - Recycling Specialist	19.69
99730 - Refuse Collector	12.39
99810 - Sales Clerk	9.46
99820 - School Crossing Guard	16.14
99830 - Survey Party Chief	21.65
99831 - Surveying Aide	12.31
99832 - Surveying Technician	16.00
99840 - Vending Machine Attendant	21.84
99841 - Vending Machine Repairer	27.71
99842 - Vending Machine Repairer Helper	21.84

Note: Executive Order (EO) 13706, Establishing Paid Sick Leave for Federal Contractors, applies to all contracts subject to the Service Contract Act for which the contract is awarded (and any solicitation was issued) on or after January 1, 2017. If this contract is covered by the EO, the contractor must provide employees with 1 hour of paid sick leave for every 30 hours they work, up to 56 hours of paid sick leave each year. Employees must be permitted to use paid sick leave for their own illness, injury or other health-related needs, including preventive care; to assist a family member (or person who is like family to the employee) who is ill, injured, or has other health-related needs, including preventive care; or for reasons resulting from, or to assist a family member (or person who is like family to the employee) who is the victim of, domestic violence, sexual assault, or stalking. Additional information on contractor requirements and worker protections under the EO is available at www.dol.gov/whd/govcontracts.

ALL OCCUPATIONS LISTED ABOVE RECEIVE THE FOLLOWING BENEFITS:

HEALTH & WELFARE: \$4.48 per hour or \$179.20 per week or \$776.53 per month

HEALTH & WELFARE EO 13706: \$4.18 per hour, or \$167.20 per week, or \$724.53 per month*

*This rate is to be used only when compensating employees for performance on an SCAcovered contract also covered by EO 13706, Establishing Paid Sick Leave for Federal Contractors. A contractor may not receive credit toward its SCA obligations for any paid sick leave provided pursuant to EO 13706.

VACATION: 2 weeks paid vacation after 1 year of service with a contractor or successor; and 4 weeks after 3 years. Length of service includes the whole span of continuous service with the present contractor or successor, wherever employed, and with the predecessor contractors in the performance of similar work at the same Federal facility. (Reg. 29 CFR 4.173)

HOLIDAYS: A minimum of ten paid holidays per year: New Year's Day, Martin Luther King Jr.'s Birthday, Washington's Birthday, Memorial Day, Independence Day, Labor Day, Columbus Day, Veterans' Day, Thanksgiving Day, and Christmas Day. (A contractor may substitute for any of the named holidays another day off with pay in accordance with a plan communicated to the employees involved.) (See 29 CFR 4.174)

THE OCCUPATIONS WHICH HAVE NUMBERED FOOTNOTES IN PARENTHESES RECEIVE THE FOLLOWING:

1) COMPUTER EMPLOYEES: Under the SCA at section 8(b), this wage determination does not apply to any employee who individually qualifies as a bona fide executive, administrative, or professional employee as defined in 29 C.F.R. Part 541. Because most Computer System Analysts and Computer Programmers who are compensated at a rate not less than \$27.63 (or on a salary or fee basis at a rate not less than \$455 per week) an hour would likely qualify as exempt computer professionals, (29 C.F.R. 541. 400) wage rates may not be listed on this wage determination for all occupations within those job families. In addition, because this wage determination may not list a wage rate for some or all occupations within those job families if the survey data indicates that the prevailing wage rate for the occupation equals or exceeds \$27.63 per hour conformances may be necessary for certain nonexempt employees. For example, if an individual employee is nonexempt but nevertheless performs duties within the scope of one of the Computer Systems Analyst or Computer Programmer occupations for which this wage determination does not specify an SCA wage rate, then the wage rate for that employee must be conformed in accordance with the conformance procedures described in the conformance note included on this wage determination.

Additionally, because job titles vary widely and change quickly in the computer industry, job titles are not determinative of the application of the computer professional exemption. Therefore, the exemption applies only to computer employees who satisfy the compensation requirements and whose primary duty consists of:

- The application of systems analysis techniques and procedures, including consulting with users, to determine hardware, software or system functional specifications;
- (2) The design, development, documentation, analysis, creation, testing or modification of computer systems or programs, including prototypes, based on and related to user or system design specifications;
- (3) The design, documentation, testing, creation or modification of computer programs related to machine operating systems; or
- (4) A combination of the aforementioned duties, the performance of which requires the same level of skills. (29 C.F.R. 541.400).
- 2) AIR TRAFFIC CONTROLLERS AND WEATHER OBSERVERS NIGHT PAY & SUNDAY PAY: If you work at night as part of a regular tour of duty, you will earn a night differential and receive an additional 10% of basic pay for any hours worked between 6pm and 6am. If you are a full-time employed (40 hours a week) and Sunday is part of your regularly scheduled workweek, you are paid at your rate of basic pay plus a Sunday premium of 25% of your basic rate for each hour of Sunday work which is not overtime (i.e. occasional work on Sunday outside the normal tour of duty is considered overtime work).

** HAZARDOUS PAY DIFFERENTIAL **

An 8 percent differential is applicable to employees employed in a position that represents a high degree of hazard when working with or in close proximity to

ordnance, explosives, and incendiary materials. This includes work such as screening, blending, dying, mixing, and pressing of sensitive ordnance, explosives, and pyrotechnic compositions such as lead azide, black powder and photoflash powder. All dry-house activities involving propellants or explosives. Demilitarization, modification, renovation, demolition, and maintenance operations on sensitive ordnance, explosives and incendiary materials. All operations involving re-grading and cleaning of artillery ranges.

A 4 percent differential is applicable to employees employed in a position that represents a low degree of hazard when working with, or in close proximity to ordnance, (or employees possibly adjacent to) explosives and incendiary materials which involves potential injury such as laceration of hands, face, or arms of the employee engaged in the operation, irritation of the skin, minor burns and the like; minimal damage to immediate or adjacent work area or equipment being used. All operations involving, unloading, storage, and hauling of ordnance, explosive, and incendiary ordnance material other than small arms ammunition. These differentials are only applicable to work that has been specifically designated by the agency for ordnance, explosives, and incendiary material differential pay.

** UNIFORM ALLOWANCE **

If employees are required to wear uniforms in the performance of this contract (either by the terms of the Government contract, by the employer, by the state or local law, etc.), the cost of furnishing such uniforms and maintaining (by laundering or dry cleaning) such uniforms is an expense that may not be borne by an employee where such cost reduces the hourly rate below that required by the wage determination. The Department of Labor will accept payment in accordance with the following standards as compliance:

The contractor or subcontractor is required to furnish all employees with an adequate number of uniforms without cost or to reimburse employees for the actual cost of the uniforms. In addition, where uniform cleaning and maintenance is made the responsibility of the employee, all contractors and subcontractors subject to this wage determination shall (in the absence of a bona fide collective bargaining agreement providing for a different amount, or the furnishing of contrary affirmative proof as to the actual cost), reimburse all employees for such cleaning and maintenance at a rate of \$3.35 per week (or \$.67 cents per day). However, in those instances where the uniforms furnished are made of "wash and wear" materials, may be routinely washed and dried with other personal garments, and do not require any special treatment such as dry cleaning, daily washing, or commercial laundering in order to meet the cleanliness or appearance standards set by the terms of the Government contract, by the contractor, by law, or by the nature of the work, there is no requirement that employees be reimbursed for uniform maintenance costs.

** SERVICE CONTRACT ACT DIRECTORY OF OCCUPATIONS **

The duties of employees under job titles listed are those described in the "Service Contract Act Directory of Occupations", Fifth Edition (Revision 1), dated September 2015, unless otherwise indicated.

** REQUEST FOR AUTHORIZATION OF ADDITIONAL CLASSIFICATION AND WAGE RATE, Standard Form 1444 (SF-1444) **

Conformance Process:

The contracting officer shall require that any class of service employee which is not listed herein and which is to be employed under the contract (i.e., the work to be performed is not performed by any classification listed in the wage determination), be classified by the contractor so as to provide a reasonable relationship (i.e., appropriate level of skill comparison) between such unlisted classifications and the classifications listed in the wage determination (See 29 CFR 4.6(b)(2)(i)). Such conforming procedures shall be initiated by the contractor prior to the performance of contract work by such unlisted class(es) of employees (See 29 CFR 4.6(b)(2)(ii)). The Wage and Hour Division shall make a final determination of conformed classification, wage rate, and/or fringe benefits which

shall be paid to all employees performing in the classification from the first day of work on which contract work is performed by them in the classification. Failure to pay such unlisted employees the compensation agreed upon by the interested parties and/or fully determined by the Wage and Hour Division retroactive to the date such class of employees commenced contract work shall be a violation of the Act and this contract. (See 29 CFR 4.6(b)(2)(v)). When multiple wage determinations are included in a contract, a separate SF-1444 should be prepared for each wage determination to which a class(es) is to be conformed.

The process for preparing a conformance request is as follows:

- 1) When preparing the bid, the contractor identifies the need for a conformed occupation(s) and computes a proposed rate(s).
- 2) After contract award, the contractor prepares a written report listing in order the proposed classification title(s), a Federal grade equivalency (FGE) for each proposed classification(s), job description(s), and rationale for proposed wage rate(s), including information regarding the agreement or disagreement of the authorized representative of the employees involved, or where there is no authorized representative, the employees themselves. This report should be submitted to the contracting officer no later than 30 days after such unlisted class(es) of employees performs any contract work.
- 3) The contracting officer reviews the proposed action and promptly submits a report of the action, together with the agency's recommendations and pertinent information including the position of the contractor and the employees, to the U.S. Department of Labor, Wage and Hour Division, for review (See 29 CFR 4.6(b)(2)(ii)).
- 4) Within 30 days of receipt, the Wage and Hour Division approves, modifies, or disapproves the action via transmittal to the agency contracting officer, or notifies the contracting officer that additional time will be required to process the request.
- 5) The contracting officer transmits the Wage and Hour Division's decision to the contractor.
- 6) Each affected employee shall be furnished by the contractor with a written copy of such determination or it shall be posted as a part of the wage determination (See 29 CFR 4.6(b)(2)(iii)).

Information required by the Regulations must be submitted on SF-1444 or bond paper.

When preparing a conformance request, the "Service Contract Act Directory of Occupations" should be used to compare job definitions to ensure that duties requested are not performed by a classification already listed in the wage determination. Remember, it is not the job title, but the required tasks that determine whether a class is included in an established wage determination. Conformances may not be used to artificially split, combine, or subdivide classifications listed in the wage determination (See 29 CFR 4.152(c)(1)).

EXHIBIT H

GOVERNMENT OF GUAM ADMINISTRATIVE PROCEDURES

A. Good Faith Negotiations

Both teams shall be fully committed to good faith negotiations. Both teams shall carefully and respectfully listen to the other and shall make best efforts to reach satisfactory agreements on all issues. Both teams shall fully cooperate in providing any clarification or documentation reasonably requested by the other. If one team disagrees with a position taken by the other, the disagreeing team will detail its concerns, which will be duly considered and responded to by the other team.

B. Expenses

The Government will make every effort to secure a site conducive to negotiations on Government facilities. In the event such arrangements cannot be made, the offerors will make such arrangements. If arrangements are made by the offeror, expenses relating to the accommodations for the negotiations site are the responsibility of the offeror. The site will include basic office equipment and a caucus room for both parties. Equipment includes a flip chart or white board, access to a telephone, facsimile machine and a photocopier machine. The offeror will advise the Government of Guam of the negotiation site for the approval of the Government.

C. Confidentiality

- During the course of the negotiations, no matters regarding the negotiations shall be discussed with anyone except members of the negotiating teams or officials of either the Government of Guam or the Insurance Company who are directly involved with the negotiations.
- 2. Utmost care shall be taken to ensure that no other person gains access to any negotiation information or materials.

D. Media/Ex Parte Communications

If any communications are to be made to the media or other persons outside those immediately involved in the negotiations, such communications shall be prepared and presented jointly by the negotiating teams. Further, except for necessary information on benefits and administration, no carrier shall release any information to the media, or to any enrollee or other person regarding any aspect of the plan, including its profitability or the reasons for rate or benefit changes, without the Government of Guam's written approval.

E. Copies

If one team submits a document to the other team, the submitting team shall, at the same time, provide a copy of such document to each member of the other team.

F. Caucusing

- 1. Either team may call a caucus at any time. However, both teams shall make best efforts to consolidate issues to discuss during caucuses and to use the designated caucus times rather than interrupting the negotiations.
- 2. The team calling the caucus may remain in the negotiating room and the other team will excuse itself, unless otherwise agreed.

G. Negotiated Changes

Negotiated contractual changes shall be memorialized in writing and signed by the authorized insurance representative and Chairperson during the negotiations and, if needed, taped at the conclusion of the negotiations.

H. Tape Recording

- 1. In general, the negotiations will not be tape recorded, except that agreements reached during the negotiations may be taped at the conclusion of the negotiations.
- 2. Notwithstanding the provisions of paragraph H.1 above, either team shall be entitled to tape sections or all of the negotiations, if they so desire, provided they notify the other team before they begin the taping.

I. Allotted Time

Each offeror's negotiations shall be concluded within three days. If additional time is requested by the plan, such may be granted by the Government of Guam's team at its sole option.

J. Impasses

- 1. If the teams cannot reach an agreement on a particular issue, that issue shall be set aside, if at all possible, and the negotiations proceeded with. Such issue may be revisited at a later stage in the negotiations.
- 2. If an agreement is not reached on all issues by the close of the negotiations, the Government of Guam's team will recommend against contracting with such Insurance Company.

K. Approval by the Governor

All written or taped agreements made by the Government of Guam's negotiating team are subject to the final approval by the Governor of Guam.

L.	Other	Approva	١
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M. Marketing

The plan selected shall comply with the Government of Guam's Marketing Guidelines (Exhibit I). No plan shall market its proposed plan to Government of Guam employees or retirees or dependents thereof prior to receiving written approval from the Director of the Department of Administration.

N. Agreement to Administrative Procedures

The Government of Guam and the Insurance Company shall adhere to these administrative procedures, which are pertinent to the Group Health Insurance Negotiations.

Insurance Company:	
Print/Signature/Date:	 _

EXHIBIT I GOVERNMENT OF GUAM MARKETING GUIDELINES FOR HEALTH INSURANCE CARRIERS

These marketing guidelines apply to all Health insurance carriers contracting with or intending to contract with the Government of Guam.

A. MARKETING MATERIALS

- 1. Each carrier is required to follow the SOB format for publication and inclusion in the marketing brochures. No deviation to the format is allowed. SOB format will be provided by the Government of Guam to carriers awarded a contract.
- Each carrier shall prepare a Government of Guam plan brochure, setting forth the benefits and conditions of the plan, for
 distribution to subscribers and prospective subscribers. Brochures must identify items such as cheat sheet, Q & A's,
 highlights of changes, information on how to access benefits and changes to benefits should they become Medicare eligible,
 guidance to seek assistance at urgent care as supposed to GMHA in case of non-emergency situations, etc.
- 3. Carriers must insert language advising subscribers that providers change during the contract period.
- 4. Carriers must provide a listing of providers who accept Medicare in the RSP brochure.
- Carriers shall make available, upon requests, marketing products to include provisions of alternative format/services (audio tape, radio announcements, large print braille, and use of ASL Interpreters, open/closed captions for videos, ASCII, HTML or word processing form on a computer diskette or CD, or HTML on an accessible website) upon request.
- 6. Each carrier may prepare other marketing materials, including newspaper and other media advertising copy, in addition to those required in paragraphs 1 above. Each carrier may also include with the marketing materials company-branded items such as pens, pencils, note pads, ID card wallets, and other similar items. The aggregate value of such items shall not exceed Five Dollars (\$5.00) per set of marketing materials.
- 7. All marketing materials, including company-branded items, must be submitted to the Government of Guam's Director of the Department of Administration or his or her designee with a written statement signed by an appropriate officer of the carrier certifying that the materials have been prepared in accordance with these guidelines.
- 8. The Government of Guam's Director of the Department of Administration must approve the content of all marketing materials and company-branded items in writing. Such written approval, however, does not guarantee the carrier that its marketing materials will be free from future scrutiny or that the carrier will not attract penalties should the marketing materials later be determined to be out of compliance with these guidelines.
- 9. Marketing materials and company-branded items which have not been approved for content may not be distributed or displayed. Further, no marketing materials may be distributed or displayed prior to the date specified in writing by the Director of the Department of Administration. No marketing materials will be approved for distribution or display prior to the conclusion of negotiations with all carriers.
- 10. Once approved for content and distribution and display, all marketing materials, excluding newspaper and other media advertising copy, must be made available to the Government of Guam subscribers, prospective subscribers, agencies and departments as quickly as possible.

B. MARKETING STANDARDS

- 1. All marketing materials, including newspaper and other media advertising and open enrollment presentations, must be truthful and not misleading.
- 2. All marketing materials must be worded simply, clearly and concisely so that they are readily understandable.

- 3. All marketing materials must contain sufficient detail to ensure accuracy.
- 4. At least the plan brochure should contain a statement that full details of the plan are contained in the carrier's contract with the Government of Guam,
- 5. If an insurance company markets wrongful products, benefits or advertises in their brochure incorrect information, the insurance company must place at least 2 media advertisements, in addition to giving memos to all enrollees, satisfactory to DOA, of correct version. Plans must also prepare an insert of corrected information and include it in all brochures, if not already corrected the language in the brochure.

D. PENALTIES FOR NON-COMPLIANCE

- Failure to conform to these guidelines may result in corrective action by the Department of Administration. Such
 corrective action will be appropriate to the circumstances. For example, if a carrier indicates benefits or other plan
 provisions that are more favorable to enrollees than those specified in the Government of Guam contract, the carrier
 will be required to provide those more generous benefits or provisions without additional compensation for the entire
 contract year(s).
- Interpretation and enforcement of these guidelines shall be at the sole discretion of the Director of the Department of Administration. The Government of Guam shall have no liability with regard to the alleged or actual failure to enforce these guidelines.

E. EXPENSES

- 1. A Personnel/Payroll Officers meeting will be conducted prior to the Open Enrollment Period. The purpose of this meeting is to advise all department representatives of the benefits available and premiums for the Health insurance program. The insurance company awarded the contract will secure and absorb the cost of the Personnel/Payroll Officers Meeting. The insurance company shall make best efforts to limit its costs to those items necessary to meet the purpose of the meeting. Specifications will be provided by the Government.
- All expenses involved in the preparation and distribution of marketing materials shall be borne by the respective carrier.
 The Government of Guam shall have no liability with regard to any marketing materials or any costs which may be incurred because of any alleged or actual delay in the approval or a carrier's marketing materials."

F. AGREEMENT TO MARKETING GUIDELINES

by signing bolow, are once	or agrees to compry	with the Marketing Ci	aideinies.
Insurance Company:			-
Print/Signature/Date			

By signing below the offerer agrees to comply with the Marketing Guidelines

EXHIBIT J

GOVERNMENT OF GUAM

GROUP HEALTH INSURANCE RULES AND REGULATION

APRIL, 1986

GOVERNMENT OF GUAM NEGOTIATING TEAM
RULES OF PROCEDURE

Adopted by virtue of Public Law 32-083

November 2013

100.0

STATUTORY AUTHORITY:

100.1

Pursuant to the authority vested in the Director of Administration by Section 4302 (b), Title 4 of the Guam Code Annotated, as amended by Public Law 18-17:52, the following rules and regulations are promulgated setting forth the information the Director of Administration requires from the companies or legal entities interest in providing health care coverage and the method by which such information shall be reported.

In accordance with that authority, all information and documentation required to be submitted under these rules and regulations shall be confidential and may not be disclosed or released by the Government of Guam without the prior written approval of the carrier. Note, however, that audited financial statements acquired by the Government of Guam pursuant to Section 4302(a), Title 4 of the Guam Code Annotated, shall be public records.

200.0

PURPOSE AND POLICY:

200.1

The purpose of these rules and regulations is to set up the standardization of the information the Director of Administration shall require from all existing or prospective carriers that desire to provide or continue to provide health care services to the Government of Guam active employees, retired employees, survivors of retired employees and covered dependents thereof.

The government is cognizant that not all carriers, insurance companies or legal entities operate on the same fiscal year or maintain universal fiscal, utilization, claim or similar health care industry required data. Consequently, each carrier shall make a good faith effort to supply the information required under these rules and regulations. If the carrier is unable to comply with a particular requirement, it shall submit a written statement to the Director of Administration prior to the deadline established in Section 300.1 explaining how it was not able to comply and what information it submitted in an effort to satisfy the requirements under these rules and regulations. The negotiating team shall review the documentation and determine whether the carrier has complied with the requirements. Nothing in these rules and regulations shall restrict the negotiating team from requiring additional information in order to ensure that uniform information is provided by each carrier.

200.2

By statue, the negotiating team has the authority to recommend for the scope and content of the Government of Guam group health/dental insurance programs.

200.3

The Director of Administration and the negotiating team are committed to the concept of providing Government of Guam enrollees with comprehensive health benefit plan and ensuring that such benefits are delivered efficiently and economically for all participants in the plan.

200.4

It is the policy of the Government of Guam to provide its enrollees to be covered by health benefits plan to be covered by health benefits plan under a minimum benefits package arrangement. The minimum benefits package is to be used uniformly when soliciting bids from any interested carriers authorized to provide these services pursuant to applicable laws. All benefits in any proposal are to be at least equal to those of the Government of Guam standard medical expense plan as mandated by Section 4302(d), Title 4 of the Guam Code Annotated. The carrier may propose additional benefits.

200.5

The minimum benefit package will be made available to all lawfully authorized carriers interested in providing coverage for the medical expenses of the Government of Guam enrollees.

200.6

The negotiating team shall require sufficient data from each carrier making a bid to be satisfied that the Government of Guam and its enrollees shall receive good value for their premium payments. In addition, each carrier that submits a proposal which has previously provided coverage for the Government of Guam enrollees shall provide reports of its past financial experience of the plan. All procedural and regulatory requirements shall be complied with on or before the deadline described in Section 300.1, unless the Director of Administration or the negotiating team determines that it is in the best interest of the enrollees to grant a waiver.

300.0

DEADLINE FOR SUBMISSION OF PROPOSAL:

300.1

All information required to be submitted by carriers under these rules and regulations shall be submitted no later than ten (10) days prior to the scheduled negotiation or within ten (10) days upon receipt of subsequent written notice of the Director of Administration. If a carrier fails to submit the required information, in part or in whole, the negotiating team need not negotiate or consider the carrier's proposal unless it determines that it is in the best interest of the Government to do so.

400.0

GENERAL BIDDING AND OPERATIONAL REQUIREMENTS:

400.1

Each carrier seeking to contract or continue to contract with the Government of Guam under the group health insurance plan shall provide the information in Section 500 of these rules and regulations and shall also furnish to the negotiating team or Director of Administration, as the case may be; information in writing on the points listed below. If the carrier is currently providing health benefits to GovGuam enrollees, any changes contained in its proposal set forth in items C and E of this paragraph shall be reported in writing to the negotiating team.

A. A written statement to the negotiating team affirming the financial capacity of the plan to provide the proposed benefits. At a minimum, this demonstration shall include the carrier's audited profit and loss statement sheet and balance sheet for its preceding fiscal year.

If the company is not organized in the United States or Guam, the annual statements of its United States department shall be submitted to the Director of Administration. If the benefits are quaranteed in whole or in part by an insurance company, the post recent "convention form" of annual statement is to be furnished. If some part or all of the funds of the plan are to be held by an administrator for such purposes as paying claims or refunds, the administrator is to indicate in writing to the negotiating team if he or she is willing to provide a fidelity bond and errors and omissions insurance that will suitably protect the Government of Guam in the event a contract is made with the administrator. The audited financial statements of the administrator for the most recent twelve (12)month period are also be to furnished the Director of Administration.

- B. Carriers will be required to submit documentation to the Director of Administration that there exists an adequate mechanism for maintaining records on enrollees. The above-mentioned administrator or carrier shall provide a written statement to the negotiating team stating whether or not funds received from the Government of Guam have been maintained in a separate fiduciary account prior to payments made pursuant to its contractual obligation.
- C. Documentation to the Director of Administration that the carrier has an effective program for containing costs for medical services, hospital confinements and any other benefits shall be provided. This includes, but is not limited to, arrangements for:
 - Effective peer review and utilization review mechanisms for monitoring health care costs. This includes
 pre-admission authorization of the need for and allowable period of hospitalization, and ongoing review
 of hospital confinements that exceed the pre-authorized periods. Carrier shall be required to submit to
 the Director of Administration the most recent peer review and utilization report of the Government of
 Guam's account, but no later than 30 days after the date of the report.
 - A mechanism for coordinating benefits when a person is insured by more than one health insurance plan for the same condition, to at least keep benefits from exceeding covered expenses incurred.
- D. Each carrier shall submit to the Director of Administration statistical report(s) showing utilization and claims data on the Government of Guam enrollees covered thereunder. If the plan's premium is community-rated, then the carrier shall provide some indication of the percentage the Government of Guam enrollees group represents of the total community covered by the carrier and the percentage of claims and expenses of the carrier incurred by the Government of Guam enrollees. The method of making this allocation is to be equitable and is to be explained to the Director of Administration. Each carrier shall provide specific information about the portion of costs due to

specific benefits. These benefits shall include but are not limited to hospitalization, physical examinations and mental care in and outside the hospital. Each carrier shall also provide enrollment information by age and sex of member, separately for enrollees.

E. Each carrier shall set forth in writing to the Director of Administration the manner in which it handles medical costs and services provided to an enrolled individual in the event of an accident or illness which occurs while off-island, whether in a state of the United States or a foreign country. The carrier shall also indicate its practice for sending enrollees to a state or foreign country for treatment not obtainable in Guam.

500.0 RATES AND RETENTIONS:

500.1

Each carrier shall include in its proposal to the Director of Administration Form GHI-1. Each carrier shall identify whether the rate which will be proposed represents a community rate (actuarially factored if necessary for difference time periods or benefits provisions), or an experience rate based on past claims/benefits adjusted or anticipated experience of the Government of Guam's group. The Director of Administration requires each carrier to factor out the results of the Government of Guam's group when the premium rate structure was based on the total experience of all covered individuals in Guam.

500.2

Each carrier shall submit an explanation to the Director of Administration of how adverse or favorable experience of the GovGuam plan will be reflected in future rates. The plan is ordinarily to be based on the experience of the GovGuam enrollees covered by the carrier under their program. If applicable, the plan must demonstrate and explain differences in assumptions between the Government of Guam program and the community or prospective rated groups.

500.3

If a plan is not experience rated, the carrier must identify the assumptions used to derive the monthly premium rate for or the portion of it due to at least each of the following, plus such others as the carrier considers appropriate. However, whether carrier is experience rated or is not experience rated, it will be required, where applicable, to submit data on the following:

- a. Capitation rate for physician's services
- b. Off-island referrals
- c. Hospitalization
- d. Prescription drugs
- e. Administrative expenses
- f. Specialist referrals (on-island)
- g. Physical examinations
- h. Maternity and obstetrical benefits
- Savings from Medicare, coordination of benefits (COB), discounts from PPOs or others.

Each Carrier shall submit additional information to the Director of Administration about features of or conditions developing with its program that warrant consideration by the negotiating team. This could be because of such reasons as actual or potential excessive utilization of the benefit(s) or because new medical developments may warrant changing a benefit. It is expected that the items which will require evaluation of emerging experience will be investigated and reviewed by the consulting actuary of the Government of Guam, who will verify relevant factors such as the reasonableness of trend factors, claim or service costs, and expense charges, and make such necessary recommendations to the negotiating team and the Director of Administration.

The Director of Administration in concert with the negotiating team may from time-to-time establish the premium categories. Each carrier shall submit its proposal in the following premium class categories, and each carrier in order to contract under the group health insurance program shall provide coverage for each premium class category below as defined in existing contract of participating carriers:

CLASS I

Single employees

CLASS II and III

Employee and family

500.5

500.4

The following items are required:

- A. Each Carrier shall submit as part of its proposal For GHI-1.
- B. Each Carrier that has previously contracted with the Government of Guam under the group health insurance program must submit Form GHI-2 for the previous contract year. In addition, each Carrier shall submit as far as practicable, a current or updated Form GHI-2.

600.0 <u>OTHER PROVISIONS:</u>

Severability Clause: If any provision of these rules and regulations, or any rule, regulation or order promulgated hereunder, or the application of any such rule, regulation or order to any person or circumstances shall be held invalid, by a court of competent jurisdiction, the remainder of these rules and regulations or orders to persons or circumstances other than those to which it is held invalid, shall not be affected thereby.

Superseding Clause: These rules and regulations supersede any and all subsequent contracts between the Government and a carrier for the provision of health care service and coverages to Government of Guam employees and retirees; and all administrative rules, regulations, directives, orders and provisions affecting these rules and regulations at the time these rules and regulations are lawfully promulgated under the Administrative Adjudication Law of Guam, and furthermore, that these rules and regulations may be subordinated to legislative laws enacted subsequent to the date of promulgation of these rules and regulations.

700.0 DEFINITIONS:

600.2

<u>"Benefits"</u> means hospital services, professional services and other authorized health care services. Alternatively, "benefits" means the various coverages provided by a carrier under the health benefit plan of the Government of Guam.

<u>"Carriers"</u> means a voluntary association, corporation, partnership, or other nongovernmental organization which is engaged in providing, paying for, or reimbursing all or part of the cost of health benefits under group insurance policies and contracts, or under medial or hospital service agreements, in consideration of premiums or other periodic charges payable to the carrier.

"Community rating system" (Community rate) means a system of fixing rates of payments for health services. Under such a system, rates of payments may be determined on a per person or per family basis and may vary with the number of persons in a family, and rates must be equivalent for all individuals and for all families of similar composition. This does not preclude changes in the rates of payments for health services based on a community rating system which are established for new enrollments or re-enrolments and which changes do not apply to existing contracts until the renewal of such contracts.

"Days" means calendar days unless otherwise specified.

"Director of Administration" means the Director of the Department of "Administration.

"Enrollee" means a subscriber or a dependent of a subscriber who is entitled to receive health services under a health insurance contract.

<u>"Enrollment"</u> means the process of converting an eligible population having the HMO or indemnity option to the HMO subscriber population or vice versa; alternatively, the aggregate of subscribers to an HMO or indemnity insurance.

"Subscriber" means an individual who enters into a health service contract, or on whose behalf a health maintenance contract is entered into, with a licensed health maintenance organization or a health insurance carrier and to whom evidence of coverage is issued. "The subscriber is differentiated from the enrollees, who are defined as anyone covered under the contract.

"<u>Utilization review</u>" means prospective, concurrent and retrospective review and analysis of date related to utilization of health care resources in terms of cost, effectiveness, efficiency, control and quality.

EXHIBIT K

GOVERNMENT OF GUAM MANDATORY CONTRACT REQUIREMENTS FY 2020 GROUP HEALTH INSURANCE PROGRAM

Government of Guam Group Health Insurance Contract Requirements

Offerors must comply with the Government of Guam Group Health Insurance Contract requirements which include PPACA.

A summary of PPACA benefits and uniform glossary of terms is included on the following website:

http://www.cciio.cms.gov/resources/other/index.html#sbcug

It is the intent of this contract to provide all of the benefits, rights and responsibilities afforded as a result of the Patient Protection and Affordable Care Act (Public Law 111-148), and the regulations promulgated under the authority of this Act.

Participating Contract

A fully participating contract will be implemented effective 10/1/18 that allows for an annual accounting settlement – no later than 4/1/19 – which will produce either a positive or negative balance after accounting for Incurred claims and guaranteed retention. This surplus will be returned to GovGuam either toward reducing any needed rate increase or in cash. If the result is a deficit, the amount of the deficit will be added to any needed rate increase for FY 2019 provided the incumbent vendor continues to be the insurance provider.

Guaranteed Renewability of Health Insurance Coverage

In the event that the government of Guam invokes the protection afforded by the Health Insurance Portability and Accountability Act of 1996, as amended, found at Section 2712 of the Public Health Services Act, and its regulations, for the guaranteed renewability of health insurance coverage the parties agree that coverage would be continued until a new contract is in place with the first ninety (90) days of coverage guaranteed at the same rate and plan designs.

Important Requirement of any Certificate of Insurance or Group Health Insurance Agreement:

The process to resolve disputes between the insurance carrier and the covered person (the subscriber and eligible dependents) related to denial of coverage by the insurance provider, to include rescissions, eligibility, pre-exclusion, medical necessity denial, and post-service reimbursement, must be consistent with the Patient Protection and Affordable Care Act and applicable regulations to include 45 CFR 147.136 and 29 CFR 2560.503. Requirements or provisions for an arbitration process to resolve disputes related to denial of coverage by the insurance carrier, to include rescissions, eligibility, pre-exclusion, medical necessity denial, and post-service reimbursement are not acceptable and will not be agreed to.

EXHIBIT L

See attached for contracts & certificates of insurance

PPO1500, 2000HSA, Retiree Supplemental Plan, Dental, and Foster Plan